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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. MAJORITY COMMITTEE PAC--MC PAC PO Box 10134 ADDRESS (number and street) (Check if address is changed) Bakersfield 93389-0134 CA CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS info@campaignfinancial.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2023 C00428052 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Thomson, Jill, , , Type or Print Name of Treasurer Thomson, Jill, , , [Electronically Filed] 05 2023 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use

Toll Free 800-424-9530 Only Local 202-694-1100

(Revised 06/2012)

FE	C Form 1 (Revised 03/2022)	Page 2
	TYPE OF COMMITTEE:	
	Candidate Committee:	
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the information below.)	e candidate
	Name of Candidate	
	Candidate Party Affiliation Office Sought: House Senate President	State
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
	Name of Candidate	
	Party Committee:	
	(d) This committee is a (National, State or subordinate) committee of the Republican,	c, etc.) Party
	Political Action Committee (PAC):	
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:
	Corporation Corporation w/o Capital Stock Labor C	rganization
	Membership Organization Trade Association Coopera	ative
	In addition, this committee is a Lobbyist/Registrant PAC.	
	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	d fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	(g) This committee is an independent expenditure-only political committee (Super PAC).	
	In addition, this committee is a Lobbyist/Registrant PAC.	
	(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PA	AC).
	In addition, this committee is a Lobbyist/Registrant PAC.	
	Joint Fundraising Representative:	
	(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
	(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Committees Participating in Joint Fundraiser	
	1 C	
	C	

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	FEC Form 1 (Revised	1 02/2009)	Page <b>3</b>
V	Vrite or Type Committee Nan	ne	
	MAJORITY C	OMMITTEE PACMC PAC	
6.		Organization, Affiliated Committee, Joint Fundraising Representa	tive, or Leadership PAC Sponsor
	United To Win		
	Mailing Address	PO Box 9891	
		Arlington	22219-
		OUT/ 1	
		CITY ▲ STATE	
	Relationship: Connected	ed Organization Affiliated Organization Joint Fundraising Repre	esentative Leadership PAC Sponso
7.	Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position of the p	erson in possession of committee
	CFS, Co	mpliance, , ,	
	Full Name		
	Mailing Address	PO Box 30844	
		Bethesda   MD	20824-0844
	Title or Position ▼	CITY ▲ STATE	E ▲ ZIP CODE ▲
			. 204 654 2220
	Custodian of Records	Telephone number	301 - 654 - 3220
8.	<b>Treasurer:</b> List the name a any designated agent (e.g.	and address (phone number optional) of the treasurer of the comm., assistant treasurer).	nittee; and the name and address of
	Full Name Thomson	٦, Jill, , ,	
	of Treasurer		
	Mailing Address	PO Box 30844	
		Bethesda ME	0   20824-0844
		CITY ▲ STATE	E ▲ ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	301 - 654 - 3220

FEC Form 1	(Revised 02/2009)	Page <b>4</b>
Full Name of Designated Agent		
Mailing Address		
Title or Position ▼	CITY ▲ STATE ▲	ZIP CODE ▲
Title of Position V	Telephone number	
	<b>Depositories:</b> List all banks or other depositories in which the committee deposits funds, hold ces or maintains funds.	ds accounts, rents
Name of Bank, D	epository, etc.	
	Chain Bridge Bank	
Mailing Address	1445-A Laughlin Ave	
	McLean VA 22101	
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of Bank, De	epository, etc.	
	Wells Fargo Bank	
Mailing Address	8302 Woodmont Avenue	
	Bethesda MD 20814	
	CITY ▲ STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h	n). <b>Joint Fundraisin</b>	g Participant:		
	1		FEC ID number	C
	2		FEC ID number	C
	3.		FEC ID number	С
	4.		FEC ID number	С
_				
		Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	McCarthy, Kevin,	, , 		
	Mailing Address	PO Box 12667		
	Maining Address			
		Bakersfield	ı CAı	, 93389-2667
	Relationship:	CITY A	STATE A	ZIP CODE A
	Connected	Organization Affiliated Committee Joint F	Fundraising Representa	ative Leadership PAC Sponsor
_				
— 8. <b>D</b> €		by name, address (phone number - optional)		
— 8. <b>D</b> €	Full Name	by name, address (phone number – optional)		
— 8. <b>D</b> e		by name, address (phone number – optional)		
	Full Name	by name, address (phone number – optional)		
	Full Name			
	Full Name	CITY A	STATE A	ZIP CODE A
	Full Name	CITY A	STATE A	
8. <b>De</b>	Full Name	CITY A	1	
—	Full Name	CITY A  Tele  ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
— Э. <b>Ва</b>	Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or ma	CITY A  Tele  ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
 Э. <b>Ва</b> sa	Full Name Mailing Address  TITLE OR POSITION	CITY A  Tele  ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
 Э. <b>Ва</b> sa	Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or material depositions are of Bank,	CITY A  Tele  ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
 Э. <b>Ва</b> sa	Full Name  Mailing Address  TITLE OR POSITION  Anks or Other Depositor fety deposit boxes or main arme of Bank, epository, etc.	CITY A  Tele  ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
 Э. <b>Ва</b> sa	Full Name  Mailing Address  TITLE OR POSITION  Anks or Other Depositor fety deposit boxes or main arme of Bank, epository, etc.	CITY A  Tele  ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦

FEC Form 1S (Revised 02/2017)

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>			
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
lame of Any Connected	I Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
Mailing Address	PO Box 30844		
	Bethesda	MD	20824-
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee Joint  fy by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) or (h). <b>Joint Fur</b>	ndraising Participant:
1.	FEC ID number
2.	FEC ID number
3.	FEC ID number
4.	FEC ID number
	nected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor
Majority Cor	nservative Fund
Mailing Addre	PO Box 30844
	Bethesda MD 20824-
Relationship:	CITY ▲ STATE ▲ ZIP CODE ▲
C	onnected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Spon
8. Designated Agent:	ldentify by name, address (phone number - optional)
8. <b>Designated Agent:</b> Full Name	: Identify by name, address (phone number – optional)
Full Name	
Full Name	
Full Name	CITY A STATE A ZIP CODE A
Full Name	CITY A STATE A ZIP CODE A
Full Name  Mailing Address  TITLE OR PO  Banks or Other Do safety deposit boxe  Name of Bank, Depository, etc.	SITION   CITY   STATE   ZIP CODE   Telephone Number   Epositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents as or maintains funds.
Full Name  Mailing Address  TITLE OR PO  Banks or Other Desafety deposit boxe  Name of Bank,	SITION   CITY   STATE   ZIP CODE   Telephone Number   Epositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents as or maintains funds.
Full Name  Mailing Address  TITLE OR PO  Banks or Other Do safety deposit boxe  Name of Bank, Depository, etc.	SITION   CITY   STATE   ZIP CODE   Telephone Number   Epositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents as or maintains funds.

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraisin</b> ç	p Participant:			
	1		FEC ID	number	C
	2.		FEC ID	number	C
	3		FEC ID	number	C
	4		FEC ID	number	C
6.	Name of Any Connected C	Organization, Affiliated Committee, Joir	nt Fundraising Rep	presentative	e, or Leadership PAC Sponsor
	Mailing Address	PO Box 30844			
		Bethesda	1	MD	20824-0844
	Relationship:	CITY ▲		STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee	<b>X</b> Joint Fundraising	Representa	tive Leadership PAC Sponsor
8.		by name, address (phone number - opti	ional)		
	Full Name				
	Mailing Address				
	TITLE OR POSITION	▼ CITY ▲	;	STATE A	ZIP CODE ▲
			Telephone N	umber	
9.	safety deposit boxes or mai	ies: List all banks or other depositories intains funds.	n which the commit	tee deposit	s funds, holds accounts, rents
	Name of Bank, Depository, etc.				
	Mailing Address				
ı		CITY ▲	;	STATE A	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or many many many many many many many many	ries: List all banks		Telephone Number	sits funds, holds accounts, rents
Banks or Other Deposito safety deposit boxes or management of Bank, Depository, etc.	ries: List all banks			sits funds, holds accounts, rents
Banks or Other Deposito safety deposit boxes or management of Bank, Depository, etc.	ries: List all banks			sits funds, holds accounts, rents
Banks or Other Deposito safety deposit boxes or ma	ries: List all banks			sits funds, holds accounts, rents
Banks or Other Deposito	ries: List all banks			sits funds, holds accounts, rents
TITLE OR POSITION	<b>V</b>		Telephone Number	
TITLE OR POSITION	▼			
		CITY A	STATE ▲	ZIP CODE ▲
		<u> </u>		
Mailing Address				
Full Name				
Designated Agent: Identify	/ by name, address	(phone number – optional)		
Connected	d Organization	Affiliated Committee	pint Fundraising Represer	ntative Leadership PAC Spo
Relationship:		CITY A	STATE 4	ZIP CODE ▲
	Bethesda		MD	20824-
Mailing Address	PO Box 30844			
Protect the House				
Name of Any Connected	Organization, Affili	iated Committee, Joint Fu	ndraising Representati	ve, or Leadership PAC Sponso
4.			FEC ID number	С
			FEC ID number	C
3.			FEC ID number	C
2				C

FEC Form 1S (Revised 02/2017)

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spon
Protect The Hous	se California 2024		
Mailing Address	PO Box 30844		
	Bethesda	, , , MD ,	20824-
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Mailing Address  TITLE OR POSITION  Banks or Other Deposito afety deposit boxes or mailing Address  Mailing Address	ries: List all banks	CITY A s or other depositories in w	Telephone N		ZIP CODE A  s funds, holds accounts, rents
TITLE OR POSITION  Banks or Other Deposito afety deposit boxes or management of Bank, Depository, etc.	ries: List all banks			lumber	
TITLE OR POSITION  Banks or Other Deposito afety deposit boxes or management of Bank, Depository, etc.	ries: List all banks			lumber	
TITLE OR POSITION  Banks or Other Deposito afety deposit boxes or management of Bank,	ries: List all banks			lumber	
TITLE OR POSITION	ries: List all banks			lumber	
TITLE OR POSITION				lumber	
	\ \	CITY A	Telephone N		ZIP CODE A
		CITY A		STATE A	ZIP CODE A
Mailing Address					
Mailing Address					
Mailing Address					
Full Name					
Designated Agent: Identify	y by name, addres	s (phone number – optiona	al)		
Connected	d Organization	Affiliated Committee	Joint Fundraisin	g Representa	ative Leadership PAC Spo
Relationship:		CITY A		STATE A	ZIP CODE ▲
	Bethesda		I	MD	20824-
Mailing Addiess					
Mailing Address	PO Box 30844				
Protect the House			undraising He	presentative	e, or Leadership PAC Spons
	0				
4.1			∟ ∣ FEC I	O number	C
4.			_	O number	C
3.			ı FEU I	0 number	C
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